

PART B - FEE(S) TRANSMITTAL

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7590

01/05/2007

William E. Lewis
RYAN, MASON & LEWIS, LLP
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Locust Valley, NY 11560



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(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/774,930	01/31/2001	Sara H. Basson	YOR920000739US1	5324

TITLE OF INVENTION: UNIVERSAL CLOSED CAPTION PORTABLE RECEIVER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	04/05/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
LEE, MICHAEL	2622	348-838000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	1 Anne V. Dougherty 2 Ryan, Mason & Lewis, LLP 3 _____
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE **International Business Machines Corporation**

(B) RESIDENCE: (CITY and STATE OR COUNTRY) **Armonk, NY**

*Armonk, NY V-142-21-10
312-21-00*

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

- Issue Fee
- Publication Fee (No small entity discount permitted)
- Advance Order - # of Copies _____

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- A check is enclosed.
- Payment by credit card. Form PTO-2038 is attached.
- The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number **50-0510** (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature William E. Lewis

Typed or printed name William E. Lewis

Date JANUARY 17, 2007

Registration No. 39,274

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